

June 25, 2009 --DOCUMENT # 4**The Importance of Environmental Design in Support of Clinical Programming**

Environmental design should support recovery: The atmosphere should be welcoming and aesthetically attractive. Room design, colors, decoration, access to natural light, open and private spaces should all foster a sense of hope and convey the idea that the residents are people who are valuable and capable of achieving a more satisfactory life than they may have previously experienced.

The architectural design should balance individual freedom and safety: The architectural design for the facility will be required to balance the tensions inherent in creating a locked facility that seeks to maximize safety on the one hand and individual freedom of movement on the other. Ways will need to be found to optimize the individual's sense of freedom in a contained space. Freedom of movement will need to be balanced against the clinical requirement of closed unit clusters when these are needed, versus the recovery requirements of individuals for privacy and their own personal space.

The architectural design should support growth and learning: The design should support the culture of learning and foster opportunity for appropriate social interaction, and include spaces for interaction with people from outside the SRR.

The architectural design should permit separation of groups: As treatment program planning and architectural design proceed these ideas will be tested against the functional competencies of the residents. Given the likelihood that there will be distinct differences among subgroups of the population, it will be necessary to have the ability to provide some separation of groups for at least some aspects of daily living. At times this may mean having differential programming on the units. One key consideration is the ability to separate those who might be aggressive or highly agitated from the rest of the population to prevent harm. Separation of sub-groups will also be important to assure that individuals with a history of abusive treatment by others are not further traumatized by contact with individuals prone to aggressive, assaultive behavior.

The architectural design should permit different levels of programming and security: At the same time, some fluidity in the structure of the environment is necessary to support the expectation that residents will change and recover and that risk behaviors will diminish as recovery progresses. A Positive Behavioral Supports framework for behavioral expectations will be employed to support safe and appropriate social behaviors in shared spaces. It is recommended that the structure have separate living units or hallways but also common dining, treatment, leisure and recreation areas.

Suggested Design Features

Following is a partial list of design features that arise from these considerations. The list was generated through conversations with providers, consumers and family members. It is expected that other ideas will emerge as other patients, providers, consumers, family members and stakeholders provide input to the design development process.

- The building entry should open into an expansive and welcoming space.
- Residents should have single bedrooms and baths.
- The nursing staff should have line-of-site capacity to observe unit activity.

- The residential space should be designed as clusters that can be closed off from other units according to the treatment needs of particular groups.
- There should be welcoming visiting areas of sufficient number to foster re-engagement with family and community contacts.
- Each residential area should have kitchenettes and personal laundry facilities to foster a home-like atmosphere and permit learning of home-care skills.
- Private residential areas should be separate from the more public (visiting, recreation, dining, programming, etc.) spaces.
- The design of the building should maximize the use of natural light.
- There should be easy access to a secure, outdoor green space.
- The outdoor space should be designed with some covered walk areas to permit residents to go outdoors in winter.
- The design should permit easy access to staff from all locations.
- Clinical staff offices should be located near residential spaces for easy resident access.
- The building design should maximize physical safety.
- There should be areas devoted to use as:
 - Computer Lab
 - Class room / educational activities / vocational skills development
 - Quiet spaces (in addition to own room)
 - Calming Rooms for de-escalation and self-management
 - Staff quiet rooms separate from workspaces